## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/572797

| CLAIMS AS FILED - PART I  |  |   |  |                               |                     |                                  |   | SMALL ENTITY TYPE   |                        | OR  | OTHER THAN OR SMALL ENTITY |                        |
|---|--|---|--|-------------------------------|---------------------|----------------------------------|---|---------------------|------------------------|-----|----------------------------|------------------------|
| -   | NATIONAL                                       | STAGE FEES                                | (Column  | n 1)                          | ((                  | Column 2)                        | 1 |                     |                        | 1   |                            | <del></del>            |
| ┝   |  | STAGE FEES                                |  |                               | ļ                   |                                  |   | RATE                | FEE                    |     | RATE                       | FEE                    |
| BASIC FEE   |  |   | SMALL ENT.   |                               | LARGE ENT. = \$ 300 |                                  |   | BASIC FEE           | \$150                  | OR  | BASIC FEE                  | \$300                  |
| EXAMINATION FEE   |  |   | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$ 100                  |                               | 9                   | her situations =<br>100 / \$ 200 |   | EXAM. FEE           |                        |     | EXAM. FEE                  | 200                    |
| SEARCH FEE  |  |   | U.S. is ISA = \$50 / \$100<br>ALL other countries =<br>\$200 / \$400 |                               |                     | ther situations = 250 / \$ 500   |   | SEARCH FEE          |                        |     | SEARCH FEE                 | 400                    |
| FEE FOR EXTRA SPEC. PGS.  |  |   | minus 100 =  |                               | / 50 =              |                                  |   | X \$ 125 =          |                        |     | X \$ 250 =                 | /                      |
| тот   | TAL CHARGE                                     | ABLE CLAIMS                               | 5 min  | us 20 =                       | * /                 |                                  |   | X \$ 25 =           |                        | OR  | X \$ 50 =                  |                        |
| INDEPENDENT CLAIMS  |  |   | / mi   | nus 3 =                       | *                   | <i></i>                          |   | X \$ 100 =          |                        | OR  | X \$ 200 =                 |                        |
| MU  | LTIPLE DEPE                                    | NDENT CLAIM                               | PRESENT  |                               |                     |                                  |   | + \$ 180 =          |                        | OR  | + \$ 360 =                 | /                      |
| * If  | the difference                                 | in column 1 is                            | less than zero   | , enter "(                    | O" in co            | lumn 2                           | • | TOTAL               |                        | OR  | TOTAL                      | 900                    |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST |  |   |  |                               |                     |                                  | 1 | SMALL E             | NTITY .                | OR  | OTHER<br>SMALL E           |                        |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |  | NUM<br>PREVIO<br>PAID         | BER<br>DUSLY        | PRESENT<br>EXTRA                 |   | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus  | **                            |                     | =                                |   | X \$ 25 =           |                        | OR  | X \$ 50 =                  |                        |
|   | Independent                                    | *   | Minus  | ***                           |                     | =                                |   | X \$ 100 =          |                        | OR  | X \$ 200 =                 |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                               |                     |                                  |   | + \$ 180 =          |                        | OR  | + \$ 360 =                 | ,                      |
|   |  |   |  |                               |                     |                                  |   | TOTAL ADDIT.<br>FEE |                        | OR  | TOTAL ADDIT.<br>FEE        |                        |
|   |  | (Column 1)                                |  | (Colur                        |                     | (Column 3)                       |   |                     |                        | _   |                            |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY        | PRESENT<br>EXTRA                 |   | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | * .                                       | Minus  | **                            |                     | =                                |   | X \$ 25 =           |                        | OR  | X \$ 50 =                  |                        |
|   | Independent                                    | *   | Minus  | ***                           |                     | <b>=</b> .                       |   | X \$ 100 =          |                        | OR  | X \$ 200 =                 |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                               |                     |                                  |   | + \$ 180 =          |                        | OR, | + \$ 360 =                 |                        |
|   |  |   |  |                               |                     |                                  |   | TOTAL ADDIT.<br>FEE |                        | OR  | TOTAL ADDIT.<br>FEE        |                        |
|   |  |   |  |                               |                     |                                  |   |                     |                        |     |                            | ,                      |
|   |  | ımn 1 is less than the                    |  |                               |                     |                                  |   |                     |                        |     |                            |                        |

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.